

other, particularly with bodily disorders which are brought on, made worse, or prolonged by emotional disturbances.

Physical illnesses which doctors have found to be frequently caused by or associated with disturbed emotions include gastric ulcer, constipation, some skin diseases, headaches, asthma, high blood pressure, various heart diseases, rheumatic fever and rheumatic heart disease, diabetes, and even broken bones.

Physicians tell us that very often the patient is not consciously aware of the emotional disturbance that is causing his heart or stomach trouble, or some other physical disorder; the original cause of the upset emotions may have occurred years previous to the physical illness.

Jealousy, repressed fear or rage, resentment, and guilt are some of the emotions which may affect the nervous system and, in turn, the organs or tissues of the body in such a way as to bring on physical illness that prescriptions or surgery alone cannot cure.

California Heart Association Meetings.—The Annual Postgraduate Symposia on Heart Disease held under the auspices of the California Heart Association will be given as follows:

In *San Francisco*, on October 17, 18, 19 and 20 (Wednesday through Saturday). Physicians may register with the San Francisco Heart Committee, 604 Mission Street, San Francisco, 5, Mrs. Gladys Daniloff, Secretary.

In *San Diego*, on October 22nd (Monday). Symposium is sponsored by the San Diego County Medical Society. (Dinner meeting place to be announced later.)

In *Los Angeles*, on October 24, 25, and 26 (Wednesday through Friday). Physicians may register with the Los Angeles Heart Association, 117 West 9th Street, Los Angeles, 15, Mrs. Ruth Lynch, Executive Secretary.

Among the guest speakers will be Dr. Samuel A. Levine of Boston, Colonel Irving S. Wright, U. S. Army Medical Corps, Dr. James J. Waring, Professor of Medicine, University of Colorado School of Medicine.

What G. I.'s Want When They Return.—While Drew Pearson was on vacation Sgt. Max Novack, who writes "What's Your Problem?" for *Yank*, the Army weekly, contributed a guest column on the returning soldier. The following excerpts are from "Washington Merry-Go-Round" in *San Francisco Chronicle*, August 27):

... The chief thing that the man in uniform wants is to return to civilian ways of life. No one who has not had to forego the right of individual action for from two to four years can possibly understand the importance of being able to make his own decisions.

... However, many G.I.s realize that merely providing free schooling, Government-guaranteed loans and unemployment protection does not mean that all their problems will be solved by the G.I. Bill of Rights.

... Many of the G.I.s also want compulsory high school education for all, slum clearance, low-cost housing projects and universal or group hospital and medical care. If these come into being, they feel that the better world they have heard so much about will actually come about in their and their children's time. . . .

U. S. Population Estimated 139,682,000.—A population increase of more than eight million was registered during the five years ended July 1, almost equal to the 8,894,000 increase in the 10 years ended in 1940, the Department of Commerce has announced.

The population on July 1, 1945, was estimated at 139,682,000.

In the 3½ years ended July 1, births totaled 10,569,000.

This was more than double the 5,137,000 deaths, not counting war casualties.

The marriage rate reached a new height at 13.5 per 1,000 of population as of 1942. In the 3½ years ended July 1, 1945, marriages totaled 5,477,000.

Peak employment, reached in July, 1943, was nearly 55 million. In late 1944, factory employment was 17,250,000, about double that of 1939.

Female employment increased more than seven million in the five years between 1940 and 1945, to 18,200,000.

Unemployment in July, 1944, had hit a new low of one million, or less than 2 per cent of the labor force. This compared with an unemployment ratio of 15 per cent of the total labor force or 8,410,000 in July, 1940.

MEDICAL JURISPRUDENCE†

HARTLEY F. PEART, ESQ.

San Francisco

Birth Certificates

California Health and Safety Code, Section 10150, provides that the birth of each child born in the State of California must be registered pursuant to statute. Except in sparsely settled districts, or where there is no direct mail communication with the County Seat, a certificate of birth must be filed within four days after the date of each birth with the local Registrar of the district in which the birth occurred.

If a physician was in attendance upon the birth, the duty of filing the certificate is imposed, by Section 10178 of the Health and Safety Code, upon the physician. Section 10180 also provides that the father or mother of the child, the householder or owner of the premises where the birth occurred, or the manager or superintendent of the public or private institution where the birth occurred, each in the order named, shall, within ten days after the date of the birth, report the fact of birth to the local Registrar. Under Section 10180, any information which the physician is unable to fill in on the form of birth certificate prescribed by the statute, must be obtained by the local Registrar from the person reporting the birth. There is, then, a double requirement imposed by the Vital Statistics statute, viz.: (1) That the attending physician file a birth certificate; and (2) That one of the other persons named in Section 10180 report the birth. The form of birth certificate prescribed by Section 10200 of the Health and Safety Code requires that the attending physician sign a certificate as to his attendance at birth, including a statement of the hour of birth.

We have found no cases in California interpreting Section 10178, the section which requires the attending physician to file a birth certificate, and no case in which the validity of this section has been questioned. It has been held in other states, however, that the state may, in the exercise of its police power, lawfully require a physician to report to the proper authority for registration of the fact of a birth which has come under his or her observation. *Robinson v. Hamilton* 60 Iowa 134, 25 Am. Jur. 320.

A decision of the Ohio Supreme Court, *State v. Boone*, 84 Ohio 346, is summarized in Volume 25 Am. Jur. at page 320, as follows:

"But a statute requiring an investigation and notification as to facts not necessarily or naturally coming

† Editor's Note.—This department of CALIFORNIA AND WESTERN MEDICINE, presenting copy submitted by Hartley F. Peart, Esq., will contain excerpts from the syllabi of recent decisions and analyses of legal points and procedures of interest to the profession.

within the knowledge of the attending physician or midwife—namely, whether the birth is legitimate or illegitimate—and, except in case of illegitimacy, the full name, residence, color or race, birthplace, age and occupation of the father, also the maiden name in full, residence, color or race, birthplace, age, and occupation of the mother, the number of this child of the mother, and the number of her living children, has been held to be unconstitutional as requiring the physician or midwife to search out non-professional information without compensation, and as being not a valid exercise of the police power because unnecessary, unreasonable, and arbitrary."

And it is further stated:

"Some courts, however, have taken the view that a statute requiring on birth or death certificates information not within the personal knowledge of the physician is a valid exercise of the legislative discretion, but that the physician is required thereunder only to make a bona fide effort to secure the information, and that having done so, he is not liable for a penalty."

The California statute gives no indication as to who is a "physician" within the meaning of the section requiring the attending physician to file a birth certificate. In Maryland it has been held that a duly licensed and registered osteopath is to be considered a physician within the meaning of the Vital Statistics statute, unless the statute expressly precludes the acceptance of a certificate signed by an osteopath.

The California Vital Statistics statutes impose an additional requirement on attending physicians in the case of still-born children. In the case of a still-born child who has advanced to the fifth month of uterogestation, a certificate of still-birth must be filed with the local Registrar, just as in the case of a death certificate. Health and Safety Code, Section 10328 provides that the medical certificate of still-birth shall be signed by the attending physician and shall state the cause of the still-birth, if known.

LETTERS †

Concerning "A Central Medical Registry":

(COPY)

THE AMERICAN REGISTRY OF PATHOLOGY
Under the Auspices of National Research Council
Registry Office: Army Medical Museum
Washington 25, D. C.
Washington, D. C., July 30, 1945.

To the Editor:—We wish to express hearty agreement with the ideas advanced by Dr. Askey in your June number, on page 317, concerning the need for a central medical registry.

The Army Institute of Pathology, under the aegis of the National Research Council and various national medical societies, for some time has been maintaining 13 Registries, the first of which was founded by Colonel George R. Callender in 1922. Material is received from pathologists throughout this country and overseas, and one of the Registries (Bladder Tumor) now includes specimens from nearly 5,000 patients, who have been followed up yearly. These data will soon be ready for exhaustive and definitive analysis. It is only by pooling experience and material that accurate basis for making prognoses can be established and the natural history of diseases studied. We should like to impress on readers of your JOURNAL that material relevant to the Registry fields (General Tumor, Dermal, Lymphatic, Ophthalmic, Otolaryngological, Bladder, Kidney, Prostate, Chest, Dental and Oral, Neuropathologic, Orthopedic, Veterinary and Gerontologic) should be forwarded to the Institute.

† CALIFORNIA AND WESTERN MEDICINE does not hold itself responsible for views expressed in articles or letters when signed by the author.

Representative examples of the specimens entered in each Registry have been used to prepare Study Sets and Atlases, which are in constant use by physicians preparing for specialty Board examination or reviewing fields of particular interest. These materials may be borrowed on application to the Institute Director, Army Institute of Pathology, Army Medical Museum, Washington 25, D. C.

(Signed) J. E. ASH,
Colonel, Medical Corps,
Director.

Concerning Taxation of X-Ray Films or Negatives:

For reference to the exact wording of the California Board of Equalization's revised ruling, a copy of the Board's letter of June 11, 1945, is printed below. (For reference in this issue of C. and W. M., see page 135.)

(COPY)

STATE BOARD OF EQUALIZATION
STATE OF CALIFORNIA
Sales Tax Division

Sacramento 14, June 11, 1945.

Peart, Baraty & Hassard,
111 Sutter Street,
San Francisco 4, California.

Attention: Mr. Hartley F. Peart.

Gentlemen:

This is with reference to our previous correspondence regarding the application of Sales and Use Tax Ruling 23, Subdivision C, as amended April 1, 1945, to x-ray laboratories operated by radiologists.

We have advised our staff that the tax applies to the fair retail value of x-ray pictures or negatives only when there is an actual sale, i.e., transfer of title, by the producer thereof. If the producer retains ownership of the pictures or negatives, he is the consumer of film and other materials used in their production, and the tax is therefore applicable with respect to the sale of such materials to him.

We believe that the foregoing will clarify many of the problems that are currently arising with respect to the application of the ruling.

Very truly yours,
(Signed) E. H. STETSON,
Associate Tax Counsel.

Concerning "Bulletin" of Alameda County Medical Association:

(COPY)

ALAMEDA COUNTY MEDICAL ASSOCIATION
364 Fourteenth Street, Oakland 12, California
Oakland, August 14, 1945.

George H. Kress, M.D., Editor, Addressed.

Dear Doctor Kress:

Thanks for your generous remarks regarding our first issue of "The Bulletin" of the Alameda County Medical Association.

These have been received from all parts of the Nation. . . .

Seriously, however, we realize that there are a number of things regarding "The Bulletin" that need very much to be improved, and shall look forward to timely criticism, bouquets, or brickbats whenever they are deserved.

Cordially yours,
ALAMEDA COUNTY MEDICAL ASSOCIATION,
Milton H. Shutes, Editor,
(Signed) ROLLEN W. WATERSON,
Executive Secretary.